

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) IVGN 600.1 CIP (L)						
<p style="text-align: center; font-size: small;">CERTIFICATE OF EFS WEB TRANSMISSION</p> <p>Date <u>November 30, 2009</u></p> <p>I hereby certify that this correspondence and any other attachment noted on the automated Acknowledgment Receipt, is being transmitted from within the Pacific Time zone to the Commissioner for Patents via the EFS Web server on the date indicated above.</p> <p style="text-align: center;">(Name) Suzanne Baycan</p> <p style="text-align: center;">(Signature) /Suzanne Baycan/</p>		<p>In re Application of Martin C. M. Barnardo et al.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Application Number 10/623,802</td> <td style="padding: 5px;">Filed July 22, 2003</td> </tr> <tr> <td colspan="2" style="padding: 5px;">For Method</td> </tr> <tr> <td style="padding: 5px;">Group Art Unit 1641</td> <td style="padding: 5px;">Examiner COUNTS, GARY W</td> </tr> </table>	Application Number 10/623,802	Filed July 22, 2003	For Method		Group Art Unit 1641	Examiner COUNTS, GARY W
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner, dated <u>May 29, 2009</u>, rejecting the following claims: <u>22-25, 34-37, 46 and 47</u></p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>540.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-3994</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the</p> <p><input type="checkbox"/> assignee of record of the entire interest.</p> <p><input type="checkbox"/> applicant.</p> <p><input type="checkbox"/> attorney or agent of record.</p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. <u>47,016</u></p> <p>November 30, 2009 /Shirley A. Recipon/ Date (Signature)</p> <p style="text-align: right; margin-right: 100px;">Shirley A. Recipon, Reg. No. 47,016 (Typed or printed name and Reg. No.)</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*</p>								
<input checked="" type="checkbox"/> * Total of <u>1</u> forms are submitted.								